Fill	in this inform	ation to identify your	case:			
Deb	tor 1	Charles C Ainswe	Orth Middle Name	Last Name		
	otor 2	First Name	Middle Nove	I and Name		
	use if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Ban	kruptcy Court for the:	SOUTHERN DISTRICT	OF MISSISSIPPI		
Cas (if kno	e number					k if this is an
						-
		<u>m 106Sum</u>				
				d Certain Statistical Information		12/15
infor	mation. Fill o	ut all of your schedul	es first; then complete th	are filing together, both are equally responsible information on this form. If you are filing amer the box at the top of this page.		
Part	1: Summa	rize Your Assets				
						assets of what you own
1.	Schedule A/	B: Property (Official F	orm 106A/B)		\$	0.00
	1b. Copy line	62, I otal personal pro	perty, from Schedule A/B		\$	21,500.00
	1c. Copy line	63, Total of all propert	y on Schedule A/B		\$	21,500.00
Part	2: Summa	rize Your Liabilities				
						iabilities nt you owe
2.			laims Secured by Property mn A, Amount of claim, at t	(Official Form 106D) the bottom of the last page of Part 1 of Schedule D.	. \$	22,303.00
3.			Unsecured Claims (Official 1 (priority unsecured claim	Form 106E/F) s) from line 6e of <i>Schedule E/F</i>	\$	0.00
	3b. Copy the	total claims from Part	2 (nonpriority unsecured cl	laims) from line 6j of Schedule E/F	\$	22,511.55
				Your total liabilitie	es \$	44,814.55
Part	3: Summa	rize Your Income and	l Expenses		-	
4.		Your Income (Official Foundation		1	\$	3,974.56
5.		Your Expenses (Officia onthly expenses from li			\$	3,955.67
Part	4: Answer	These Questions for	Administrative and Stati	stical Records		
6.	-	• • •	er Chapters 7, 11, or 13? on this part of the form. Cl	heck this box and submit this form to the court with	our other so	hedules.
7.	■ Yes What kind of	f debt do you have?				
				debts are those "incurred by an individual primarily for g for statistical purposes. 28 U.S.C. § 159.	or a persona	l, family, or
		ebts are not primarily t with your other sched		ve nothing to report on this part of the form. Check to	his box and s	submit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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Debtor 1 Charles C Ainsworth Case number (if known) From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form

122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

5,016.25

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on <i>Schedule E/F</i> , copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

Fill in	this info	ormation to identify you	case and this filing:			
Debto	or 1	Charles C Ainsw	vorth			
		First Name	Middle Name	Last Name		
Debto		E N	ACT III AT			
(Spouse	e, if filing)	First Name	Middle Name	Last Name		
United	d States E	Bankruptcy Court for the:	SOUTHERN DISTRICT OF	F MISSISSIPPI		
Cooo	number					<b>—</b> • • • • • • • • • • • • • • • • • • •
Case	Humber					☐ Check if this is an amended filing
						amonada ming
<b>~</b>		4004/5				
Offi	<u>cial F</u>	<u>orm 106A/B</u>				
Scl	hedu	ile A/B: Prop	perty			12/15
think it informa	fits best. ation. If m r every qu	Be as complete and accur ore space is needed, attack estion.	ate as possible. If two married	ce. If an asset fits in more than of people are filing together, both a On the top of any additional page of On Own or Have an Interest In	are equally responsible for s	supplying correct
		<del>-</del>	<u></u>			
1. Do y	ou own o	r have any legal or equitab	le interest in any residence, bu	ilding, land, or similar property?	•	
	No. Go to F	art 2.				
ΠY	es. Where	e is the property?				
Part 2	Describ	e Your Vehicles				
someo	ne else d	lrives. If you lease a vehic		cles, whether they are registe e G: Executory Contracts and U		vehicles you own that
		indone, indones, epont e	inity volucios, motorcyclos			
	No					
<b>I</b>	⁄es					
3.1	Make:	Honda	Who has an interes	st in the property? Check one		claims or exemptions. Put red claims on Schedule D:
	Model:	Civic	Debtor 1 only			aims Secured by Property.
	Year:	2008	Debtor 2 only		Current value of the	Current value of the
		nate mileage:	Debtor 1 and De		entire property?	portion you own?
	Other info	ormation:	At least one of th	e debtors and another		
			Check if this is (see instructions)	community property	\$7,500.00	\$7,500.00
3.2	Make:	Ford	Who has an interes	et in the property? Check are	Do not deduct secured	claims or exemptions. Put
J.Z		F350		at in the property? Check one	the amount of any secu	red claims on Schedule D: aims Secured by Property.
	Model: Year:	1995	Debtor 1 only			, , ,
		nate mileage:	Debtor 2 only  Debtor 1 and Del	htor 2 only	Current value of the entire property?	Current value of the portion you own?
	Other info			otor 2 only e debtors and another	citino property:	portion you own:
i	not run		At least one of th	e debitota and andlitel		
		<del>-</del>	Check if this is (see instructions)	community property	\$800.00	\$800.00

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Debi	tor 1 Charles C Ainsworth	Ca	se number (if known)	
3.3	Make: Chevy Model: 2500	Who has an interest in the property? Check one  Debtor 1 only	Do not deduct secured cl the amount of any secure Creditors Who Have Clai	ed claims on Schedule D:
	Year: 2002	Debtor 2 only	Current value of the	Current value of the
	Approximate mileage:  Other information:	□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	entire property?	portion you own?
		Check if this is community property (see instructions)	\$2,500.00	\$2,500.00
3.4	Make: Chevy Model: 3500	Who has an interest in the property? Check one	Do not deduct secured cl the amount of any secure Creditors Who Have Clai	ed claims on Schedule D:
	Year: 1998	■ Debtor 1 only □ Debtor 2 only		
	Approximate mileage:	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Other information:	At least one of the debtors and another	······································	<b>,,</b>
		Check if this is community property (see instructions)	\$1,500.00	\$1,500.00
.p. Part Do y  6. Ho	3: Describe Your Personal and Household you own or have any legal or equitable ousehold goods and furnishings examples: Major appliances, furniture, lird No	e interest in any of the following items?  nens, china, kitchenware		\$12,300.00  Current value of the portion you own?  Do not deduct secured claims or exemptions.
	nousenoia ç	goods and furniture		\$3,000.00
E	ectronics Examples: Televisions and radios; audio, including cell phones, camera No Yes. Describe	, video, stereo, and digital equipment; computers, printer ss, media players, games	s, scanners; music collection	ons; electronic devices
	electronics			\$600.00
E	ollectibles of value  Examples: Antiques and figurines; painting other collections, memorabilian No  1 Yes. Describe	ngs, prints, or other artwork; books, pictures, or other art a, collectibles	objects; stamp, coin, or ba	seball card collections;
Ε	quipment for sports and hobbies Examples: Sports, photographic, exercise musical instruments  No	e, and other hobby equipment; bicycles, pool tables, golf	clubs, skis; canoes and ka	ayaks; carpentry tools;

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Debtor 1	Charles C Ainsworth	Case number (if known	ı)
☐ Yes.	Describe		
■ No	ples: Pistols, rifles, shotguns, ammunition, and rela	ated equipment	
☐ Yes.	Describe		
☐ No	ples: Everyday clothes, furs, leather coats, designed	er wear, shoes, accessories	
. 00.			4=
	clothing		\$500.00
■ No		ent rings, wedding rings, heirloom jewelry, watches, gems	, gold, silver
Exam ■ No	arm animals ples: Dogs, cats, birds, horses Describe		
■ No	ther personal and household items you did not Give specific information	already list, including any health aids you did not list	
	the dollar value of all of your entries from Part 3. Write that number here	3, including any entries for pages you have attached	\$4,100.00
Part 4: De	escribe Your Financial Assets		
Do you o	wn or have any legal or equitable interest in any	y of the following?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
■ No	ples: Money you have in your wallet, in your home,	in a safe deposit box, and on hand when you file your pet	ition
	cits of money  ples: Checking, savings, or other financial accounts  institutions. If you have multiple accounts with	s; certificates of deposit; shares in credit unions, brokerage h the same institution, list each.	e houses, and other similar
		Institution name:	
	17.1. <b>checking</b>	FSNB	\$100.00
	s, mutual funds, or publicly traded stocks ples: Bond funds, investment accounts with broker.	age firms, money market accounts	
	Institution or issuer nam	ne:	
	ublicly traded stock and interests in incorporate venture	ed and unincorporated businesses, including an intere	est in an LLC, partnership, and
☐ Yes.	Give specific information about them  Name of entity:	% of ownership:	

De	ebtor 1	Charles C Ainsworth			Case number (if known)	
20.	Nego	nment and corporate bonds and c tiable instruments include personal of negotiable instruments are those you	checks, cashiers'	checks, promissory notes, and	d money orders.	
	■ No			come and any angum g or arem	g	
	_	. Give specific information about the	m			
		Issuer name:				
21.	Exam	ment or pension accounts  ples: Interests in IRA, ERISA, Keogl	h, 401(k), 403(b)	, thrift savings accounts, or other	er pension or profit-sharing pla	ns
	■ No					
	☐ Yes.	List each account separately.  Type of accoun	nt:	Institution name:		
22.	Your	ity deposits and prepayments share of all unused deposits you hav ples: Agreements with landlords, pre				s, or others
	■ No					
	☐ Yes.			Institution name or individual:		
23.	Annui ■ No	ties (A contract for a periodic payme	ent of money to y	ou, either for life or for a number	er of years)	
		Issuer name and des	scription.			
24.	26 U.S	sts in an education IRA, in an acco .C. §§ 530(b)(1), 529A(b), and 529(b		ed ABLE program, or under a	qualified state tuition progr	am.
	■ No □ Yes.	Institution name and	description. Sep	parately file the records of any in	nterests.11 U.S.C. § 521(c):	
25.	Trusts	s, equitable or future interests in p	property (other t	than anything listed in line 1)	, and rights or powers exerc	sable for your benefit
		Give specific information about the	em			
26.		ts, copyrights, trademarks, trade suples: Internet domain names, websit			ements	
	_	Give specific information about the	em			
27.		ses, franchises, and other general ples: Building permits, exclusive lice		ve association holdings, liquor li	icenses, professional licenses	
		Give specific information about the	em			
M	oney or	property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax re □ No	funds owed to you				
	■ Yes	Give specific information about the	m, including whe	ther you already filed the return	ns and the tax years	
		Г				-
			potential futu	re tax refund(s)		\$5,000.00
29.		y support  ples: Past due or lump sum alimony	, spousal suppor	rt, child support, maintenance, o	divorce settlement, property se	ttlement
		Give specific information				

☐ Yes. Give specific information.....

De	ebtor 1	Charles C Ainsworth	Case number (if known)	
30.		amounts someone owes you  bles: Unpaid wages, disability insurance payments, disabilit  benefits; unpaid loans you made to someone else	ty benefits, sick pay, vacation pay, workers' comper	nsation, Social Security
	■ No			
	☐ Yes.	Give specific information		
31.	Examp	ets in insurance policies oles: Health, disability, or life insurance; health savings acc	ount (HSA); credit, homeowner's, or renter's insurar	nce
	■ No	Name that is a superior and the fact that the same	l	
	⊔ Yes.	Name the insurance company of each policy and list its va Company name:	lue. Beneficiary:	Surrender or refund value:
32.		terest in property that is due you from someone who h		
	someo	are the beneficiary of a living trust, expect proceeds from a one has died.	life insurance policy, or are currently entitled to rece	eive property because
	■ No			
	⊔ Yes.	Give specific information		
33.	Examp	against third parties, whether or not you have filed a loles: Accidents, employment disputes, insurance claims, or		
	■ No □ Yes.	Describe each claim		
34.	Other of	contingent and unliquidated claims of every nature, inc	cluding counterclaims of the debtor and rights to	set off claims
	■ No			
	☐ Yes.	Describe each claim		
35.	Any fin ■ No	nancial assets you did not already list		
		Give specific information		
36		the dollar value of all of your entries from Part 4, included art 4. Write that number here		\$5,100.00
Pa	rt 5: De	scribe Any Business-Related Property You Own or Have an Inf	terest In. List any real estate in Part 1.	
37.	Do you	own or have any legal or equitable interest in any business-rel	ated property?	
١	No. Go	to Part 6.		
I	☐ Yes. G	Go to line 38.		
Pa		scribe Any Farm- and Commercial Fishing-Related Property Yo ou own or have an interest in farmland, list it in Part 1.	ou Own or Have an Interest In.	
46.	Do you	ı own or have any legal or equitable interest in any farn	n- or commercial fishing-related property?	
	No.	Go to Part 7.		
	☐ Yes	. Go to line 47.		
Pa	rt 7:	Describe All Property You Own or Have an Interest in That Y	ou Did Not List Above	
53.		have other property of any kind you did not already lis	st?	
	Examp ■ No	oles: Season tickets, country club membership		
		Give specific information		
		,		
54	. Add t	he dollar value of all of your entries from Part 7. Write	that number here	\$0.00

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Debtor '	Charles C Ainsworth		Case number (if known)	
Part 8:	List the Totals of Each Part of this Form			
55. <b>Pa</b>	rt 1: Total real estate, line 2		······	\$0.00
56. <b>Pa</b>	rt 2: Total vehicles, line 5	\$12,300.00		
57. <b>Pa</b>	rt 3: Total personal and household items, line 15	\$4,100.00		
58. <b>Pa</b>	rt 4: Total financial assets, line 36	\$5,100.00		
59. <b>Pa</b>	rt 5: Total business-related property, line 45	\$0.00		
60. <b>Pa</b>	rt 6: Total farm- and fishing-related property, line 52	\$0.00		
61. <b>Pa</b>	rt 7: Total other property not listed, line 54 +	\$0.00		
62. <b>To</b>	tal personal property. Add lines 56 through 61	\$21,500.00	Copy personal property total	\$21,500.00
63. <b>To</b>	tal of all property on Schedule A/B. Add line 55 + line 62			\$21,500.00

						_
Fil	l in this inforn	nation to identify your	case:			
De	btor 1	Charles C Ainswo				
De	ebtor 2	First Name	Middle Name	L	ast Name	
	ouse if, filing)	First Name	Middle Name	L	ast Name	
Un	ited States Ba	nkruptcy Court for the:	SOUTHERN DISTRICT OF I	MISS	ISSIPPI	
Ca	ise number					
	nown)					☐ Check if this is an
						amended filing
O	fficial Fo	rm 106C				
			perty You Cla	im	as Evemnt	4/16
<u> </u>	Criedui	e C. THE FIG	perty rou cia		as Exempt	4/10
the nee	property you li	sted on <i>Schedule A/B: P</i> d attach to this page as r	roperty (Official Form 106A/B)	as yo	our source, list the property that you	r supplying correct information. Using claim as exempt. If more space is additional pages, write your name and
spe any fun exe	ecific dollar an applicable st ds—may be u emption to a p	nount as exempt. Alter catutory limit. Some exe nlimited in dollar amou	natively, you may claim the f emptions—such as those for int. However, if you claim an	ull fai heal exen	th aids, rights to receive certain b nption of 100% of fair market valu	ing exempted up to the amount of enefits, and tax-exempt retirement
Pa	rt 1: Identif	y the Property You Cla	im as Exempt			
1.	Which set of	exemptions are you cl	aiming? Check one only, ever	n if yo	our spouse is filing with you.	
	You are cla	aiming state and federal	nonbankruptcy exemptions. 1	11 U.S	S.C. § 522(b)(3)	
	☐ You are cla	aiming federal exemption	ns. 11 U.S.C. § 522(b)(2)			
2.				empt.	fill in the information below.	
		on of the property and line	•	• •	ount of the exemption you claim	Specific laws that allow exemption
		that lists this property	portion you own			·
			Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	2008 Honda		\$7,500.00		\$0.00	Miss. Code Ann. § 85-3-1(a)
	Line from Scl	hedule A/B: <b>3.1</b>			100% of fair market value, up to	
					any applicable statutory limit	
	1995 Ford I	F350	****		#200.00	Miss. Code Ann. § 85-3-1(a)
	not running	3	\$800.00	-	\$800.00	missi sodo riini 3 oo o riu)
	Line from Scl	hedule A/B: <b>3.2</b>			100% of fair market value, up to any applicable statutory limit	
					any apphoasis statusty min	
	2002 Chevy	<b>/ 2500</b> hedule A/B: <b>3.3</b>	\$2,500.00		\$2,500.00	Miss. Code Ann. § 85-3-1(a)
	LIIIG IIOIII 30/	104416 FVD. <b>9.9</b>			100% of fair market value, up to any applicable statutory limit	
	1998 Chevy	/ 3500	\$1,500.00	_	\$1,500.00	Miss. Code Ann. § 85-3-1(a)
	-	nedule A/B: <b>3.4</b>	Ψ1,300.00	_	100% of fair market value, up to	

Official Form 106C

\$3,000.00

any applicable statutory limit

100% of fair market value, up to any applicable statutory limit

\$3,000.00

household goods and furniture

Line from Schedule A/B: 6.1

Miss. Code Ann. § 85-3-1(a)

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Den	Charles C Amsworth					
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own			Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
	electronics Line from Schedule A/B: 7.1	\$600.00		\$600.00	Miss. Code Ann. § 85-3-1(a)	
	Line IIom Schedule AVD. 1.1	Г		100% of fair market value, up to any applicable statutory limit		
	clothing Line from Schedule A/B: 11.1	\$500.00		\$500.00	Miss. Code Ann. § 85-3-1(a)	
	Line IIom Schedule AVD. 11.1			100% of fair market value, up to any applicable statutory limit		
	potential future tax refund(s) Line from Schedule A/B: 28.1	\$5,000.00		\$5,000.00	Miss. Code Ann. § 85-3-1(j)	
	Line from Schedule AVD. 20.1			100% of fair market value, up to any applicable statutory limit		
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every  No  Yes. Did you acquire the property cover  No	3 years after that for ca	ises fi	•	,	
	☐ Yes					

Fill in this information to identify you	ır case:				
Debtor 1 Charles C Ains	WORTH Middle Name Last Nan	ne	-		
Debtor 2					
(Spouse if, filing) First Name	Middle Name Last Nan	ne			
United States Bankruptcy Court for the	: SOUTHERN DISTRICT OF MISSISSIP	PI			
			-		
Case number (if known)			☐ Check	if this is an	
(			_	ded filing	
Official Form 106D					
Schedule D: Creditors	Who Have Claims Secu	red by Propert	Y	12/15	
		<u> </u>		4: If	
	If two married people are filing together, both a out, number the entries, and attach it to this for				
number (if known).					
Do any creditors have claims secured b	y your property?				
☐ No. Check this box and submit t	his form to the court with your other schedule	es. You have nothing else	to report on this form.		
Yes. Fill in all of the information	below.				
Part 1: List All Secured Claims					
2. List all secured claims. If a creditor has	more than one secured claim, list the creditor sepa	Column A	Column B	Column C	
for each claim. If more than one creditor has	s a particular claim, list the other creditors in Part 2	. As Amount of claim	Value of collateral	Unsecured	
much as possible, list the claims in alphabeti	ical order according to the creditor's name.	Do not deduct the value of collateral.	that supports this claim	portion If any	
2.1 Cnac - Ms104	Describe the property that secures the claim:	\$11,619.00	\$7,500.00	\$4,119.00	
Creditor's Name	2008 Honda Civic				
2521 Hww 90 East	As of the date you file, the claim is: Check all the	nat			
2521 Hwy 80 East Pearl, MS 39208	apply.  ☐ Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
rumbor, exists, exp, exact a 2.p estat	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	☐ An agreement you made (such as mortgage	or secured			
Debtor 2 only	car loan)				
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lie	en)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit				
Check if this claim relates to a	Other (including a right to offset)				
community debt					
Opened					
07/18 Last					
Active Date debt was incurred 2/22/19	Last 4 digits of account number 67	702			
ZIZZI13	Last 4 digits of account number				
2.2 Tower Loan	Describe the property that secures the claim:	\$6,258.00	Unknown	\$6,258.00	
Creditor's Name	Secured	Ψ0,230.00		Ψ0,230.00	
	33333				
Attn: Bankruptcy	As of the date you file, the claim is: Check all the	not.			
Po Box 320001	apply.	ial			
Flowood, MS 39232	Contingent				
Number, Street, City, State & Zip Code	Unliquidated				
Who owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.				
_	☐ An agreement you made (such as mortgage	or secured			
■ Debtor 1 only □ Debtor 2 only	car loan)	oi socuicu			
Debtor 2 only  Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lie	an)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit	···· <i>,</i>			

Official Form 106D

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Debtor	1 Charles C	Ainsworth		Case nur	mber (if known)		
	First Name	Middle Na	me Last Name		-		
	ck if this claim re nmunity debt	elates to a	Other (including a right to offset)				
Date de	ebt was incurred	Opened 12/08/17 Last Active 10/18/18	Last 4 digits of account number	1688			
2.3 <b>T</b>	ower Loan		Describe the property that secures the cl	aim:	\$4,426.00	Unknown	\$4,426.00
	reditor's Name		Secured		<u> </u>	<u> </u>	Ψ+,+20.00
			Occured				
F N	Attn: Bankrup To Box 320001 Towood, MS 3 umber, Street, City, S wes the debt? C	39232 tate & Zip Code	As of the date you file, the claim is: Check apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.	all that			
Deb	tor 1 only		☐ An agreement you made (such as mortg	age or secured			
	tor 2 only		car loan)	3			
	tor 1 and Debtor 2	only	☐ Statutory lien (such as tax lien, mechanic	c's lien)			
	ast one of the deb		☐ Judgment lien from a lawsuit				
☐ Che	ck if this claim re mmunity debt		Other (including a right to offset)				
Date de	ebt was incurred	Opened 4/13/18 Last Active 10/18/18	Last 4 digits of account number	2053			
If this Write	is the last page of that number here	of your form, add t	olumn A on this page. Write that number h the dollar value totals from all pages. r a Debt That You Already Listed	ere:	\$22,303.00 \$22,303.00		
trying to	o collect from your creditor for any	u for a debt you ov	e notified about your bankruptcy for a deb we to someone else, list the creditor in Par you listed in Part 1, list the additional cred s page.	rt 1, and then list t	he collection agenc	y here. Similarly, if yo	u have more
ı	Name, Number, St Tower Loan Pob 320001 Flowood, MS	reet, City, State & Z	lip Code		Part 1 did you enter t	he creditor? 2.2	
ı	Name, Number, St Fower Loan Pob 320001 Flowood, MS	reet, City, State & Z	'ip Code		Part 1 did you enter t	he creditor? 2.3	

Fill in t	this inform	ation to identify your	case:					
Debtor	1	Charles C Ainswo	orth					
		First Name	Middle N	lame	Last Name			
Debtor (Spouse i		First Name	Middle N	lame	Last Name			
United	States Ban	kruptcy Court for the:	SOUTHER	N DISTRICT OF	MISSISSIPPI			
Case n				_			_	heck if this is an mended filing
		106E/F F: Creditors W	/ho Have	Unsecure	d Claims			12/15
any exec Schedul Schedul eft. Atta	cutory contra e G: Executo e D: Credito ch the Conti d case num	acts or unexpired leases ory Contracts and Unexp rs Who Have Claims Sec	that could res ired Leases (O ured by Prope je. If you have	ult in a claim. Als official Form 106Gj rty. If more space no information to	o list executory on the control of t	Part 2 for creditors with NON contracts on Schedule A/B: Pany creditors with partially sithe Part you need, fill it out, do not file that Part. On the to	roperty (Offici ecured claims number the ent	al Form 106A/B) and on that are listed in tries in the boxes on the
1. Do	any creditor	s have priority unsecure	d claims again	st you?				
	No. Go to Pa	rt 2.						
	Yes.							
Part 2:	List All	of Your NONPRIORIT	Y Unsecured	d Claims				
3. Do	any creditor	s have nonpriority unsec	cured claims a	gainst you?				
	No. You have	e nothing to report in this p	art. Submit this	form to the court w	ith your other sch	edules.		
	Yes.							
uns	ecured claim n one credito	, list the creditor separately	y for each claim	. For each claim lis	ted, identify what	holds each claim. If a credit ype of claim it is. Do not list cla three nonpriority unsecured cl	ims already inc	luded in Part 1. If more
								Total claim
4.1		ecovery Service		Last 4 digits of a	account number	52N1		\$776.00
	Attn: Ba	Creditor's Name  nkruptcy		When was the de	ebt incurred?	Opened 03/15		-
	Number Str	n, PA 18505 eet City State Zlp Code		As of the date yo	ou file, the claim	s: Check all that apply		
	_	red the debt? Check one.		_				
	Debtor 1	•		Contingent				
	Debtor 2	-		Unliquidated				
		I and Debtor 2 only		Disputed				
		one of the debtors and and		Type of NONPRI		d claim:		
	debt	f this claim is for a comi	munity		ising out of a sepa	ration agreement or divorce th	at you did not	
	_	n subject to offset?		report as priority of				
	No			•	·	g plans, and other similar debt		
	☐ Yes			Other. Specify	Collection	Attorney Ashworth Co	llege	-

Debto	Charles C Ainsworth	Case number (if known)					
4.2	Alfa Insurance	Last 4 digits of account number	7971	\$12,652.55			
	Nonpriority Creditor's Name PO Box 11000	When was the debt incurred?					
	Montgomery, AL 36191-0001  Number Street City State Zlp Code						
	Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims					
	No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts				
	Yes	Other. Specify					
4.3	Applied Bnk	Last 4 digits of account number	1933	\$744.00			
	Nonpriority Creditor's Name Attn: Bankruptcy		Opened 04/13 Last Active				
	Po Box 17125	When was the debt incurred?	5/19/14				
	Wilmington, DE 19176		in Ohani all that and in				
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	<b>is:</b> Спеск ан that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt		aration agreement or divorce that you did not				
	Is the claim subject to offset?  ■ No	report as priority claims  Debts to pension or profit-shari	ng plans, and other similar debts				
	☐ Yes	■ Other. Specify Charge Ac					
4.4	ARS Nonpriority Creditor's Name	Last 4 digits of account number		Unknown			
	PO Box 321472	When was the debt incurred?					
	Flowood, MS 39232-1472	_					
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt		aration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims					
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts				
	Yes	Other Specify					

Debtor	1 Charles C Ainsworth	Case number (if known)				
4.5	Bank of Missouri Nonpriority Creditor's Name	Last 4 digits of account number		\$460.00		
	5109 Broadband Lane Sioux Falls, SD 57109	When was the debt incurred?				
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts			
	Yes	_				
16	CMDE Financial Services	Look & divite of account number	0.440	¢422.00		
4.6	CMRE Financial Services Nonpriority Creditor's Name	Last 4 digits of account number	8418	\$123.00		
	Attn: Bankruptcy 3075 E Imperial Hwy Ste 200 Brea. CA 92811	When was the debt incurred?	Opened 09/17			
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.	,				
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	No	Debts to pension or profit-sharing	ng plans, and other similar debts			
	Yes	Other. Specify Collection Services O	Attorney Keystone Medical f M			
4.7	CMRE Financial Services	Last 4 digits of account number	8449	\$123.00		
	Nonpriority Creditor's Name Attn: Bankruptcy 3075 E Imperial Hwy Ste 200	When was the debt incurred?	Opened 02/17			
	Brea, CA 92811					
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	□Yes	Collection Other. Specify Services O	Attorney Keystone Medical			

Debto	Charles C Ainsworth		Case number (if known)	
4.8	CMRE Financial Services	Last 4 digits of account number	9786	\$75.00
	Nonpriority Creditor's Name Attn: Bankruptcy 3075 E Imperial Hwy Ste 200 Brea, CA 92811	When was the debt incurred?	Opened 03/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	<ul><li>☐ Student loans</li><li>☐ Obligations arising out of a sepa</li></ul>	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Collection Services O	Attorney Keystone Medical f M	
4.9	Community Bank	Last 4 digits of account number	6927	\$408.00
	Nonpriority Creditor's Name PO Box 2019 Brandon, MS 39043	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.1 0	Entergy	Last 4 digits of account number		Unknown
	Nonpriority Creditor's Name 4809 Jefferson Hwy. Ste A	When was the debt incurred?		
	New Orleans, LA 70121-3138  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other Specify		

Debto	Charles C Ainsworth		Case number (if known)	
4.1	I C System Inc	Last 4 digits of account number	4333	\$856.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 64378	When was the debt incurred?	Opened 12/18	
	St Paul, MN 55164  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Collection	Attorney Att Directv	
4.1	LVNV Funding/Resurgent Capital	Last 4 digits of account number	6851	\$217.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 10497	When was the debt incurred?	Opened 06/17	
	Greenville, SC 29603  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	■ Other. Specify Fingerhut F	Company Account Webbank Treshstart	
4.1	Merit Health	Last 4 digits of account number	4507	\$97.00
	Nonpriority Creditor's Name PO Box 281437 Atlanta, GA 30384-1437	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify		

Debtor	1 Charles C Ainsworth		Case number (if known)	
4.1 4	MidAmerica Bank & Trust Company	Last 4 digits of account number	2732	\$471.00
	Nonpriority Creditor's Name Attn: Bankruptcy 216 West Second St Dixon, MO 65459	When was the debt incurred?	Opened 06/18 Last Active 9/24/18	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.1 5	Peoples Bank	Last 4 digits of account number	0418	\$59.00
	Nonpriority Creditor's Name  160 East Maud Mendenhall, MS 39114	When was the debt incurred?	Opened 4/10/18 Last Active 5/11/18	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	☐ Debts to pension or profit-sharin	• •	
	Yes	Other. Specify Deposit Re	lated	
4.1 6	Portfolio Recovery	Last 4 digits of account number		\$1,769.00
	Nonpriority Creditor's Name PO Box 12914 Norfolk, VA 23541	When was the debt incurred?		
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	□ vos	Other Ones!!		

Debtor 1 Charles C Ainsworth		Case number (if known)			
4.1 7	Progressive Leasing	Last 4 digits of account number	Unknown		
•	Nonpriority Creditor's Name 256 West Data Drive Draper, UT 84020	When was the debt incurred?			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	□ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify			
4.1 8	Security Check	Last 4 digits of account number 0881	\$1,576.00		
	Nonpriority Creditor's Name	Wilson was the debt in sure do Opened 00/47			
	Attn: Bankruptcy Dept 2612 Jackson Ave W Oxford, MS 38655	When was the debt incurred? Opened 06/17			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	□ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes	■ Other. Specify Collection Attorney Tempoe LIc			
4.1	Security Credit	Last 4 digits of account number	Unknown		
<u> </u>	Nonpriority Creditor's Name 306 Enterprise Dr	When was the debt incurred?			
	Oxford, MS 38655	As of the date way file the plaint in O			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	Student loans			
	debt	Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims  ☐ Debts to pension or profit-sharing plans, and other similar debts			
		_			
	Yes	Other. Specify			

Debto	Charles C Ainsworth		Case number (if known)	
4.2	Southarn Financial Systems Inc	Lord British Comment	5923	\$1 <i>474</i> 00
0	Southern Financial Systems, Inc Nonpriority Creditor's Name	Last 4 digits of account number		\$1,474.00
	Attn: Bankruptcy	When was the debt incurred?	Opened 6/04/13	
	Po Box 15203 Hattiesburg, MS 39404			
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Simpson C	ounty General	
4.2	Southern Pine	Last 4 digits of account number		\$0.00
1	Nonpriority Creditor's Name			
	110 Risher St	When was the debt incurred?		
	Taylorsville, MS 39168  Number Street City State Zlp Code	As of the date you file, the claim	e. Chock all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim	<b>з.</b> Опеск ан так арріу	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.2	Southwest Credit Systems	Last 4 digits of account number	6302	\$631.00
	Nonpriority Creditor's Name			
	4120 International Parkway	When was the debt incurred?	Opened 1/03/18	
	Suite 1100 Carrollton, TX 75007			
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharin	a plane, and other similar debte	
	■ No		g pians, and other similar debts	
	∏ Yes	Other Specific 11 Viasat		

Debto	Charles C Ainsworth		Case number (if known)	
4.2	Whynot Lease It	Last 4 digits of account nu	mber	Unknown
	Nonpriority Creditor's Name 1750 Elm St	When was the debt incurred	d?	
	Suite 1200 Manchester, NH 03104 Number Street City State Zlp Code	As of the date you file, the	claim is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY uns	ecured claim:	
	☐ Check if this claim is for a community debt		a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	a separation agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-	sharing plans, and other similar debts	
	□ Yes	Other. Specify		
Part 3	List Others to Be Notified About a D	ebt That You Already Listed		
is try	ring to collect from you for a debt you owe to	someone else, list the original cred nat you listed in Parts 1 or 2, list the	that you already listed in Parts 1 or 2. For example, if a litor in Parts 1 or 2, then list the collection agency here e additional creditors here. If you do not have addition	e. Similarly, if you
	and Address	On which entry in Part 1 or Part 2 d	· <u> </u>	
	ty Recovery Service ox 4031	Line 4.1 of (Check one):	Part 1: Creditors with Priority Unsecured Claims	
	ming, PA 18644		■ Part 2: Creditors with Nonpriority Unsecured Claim	S
		Last 4 digits of account number		
Appl	and Address ied Bnk ox 17125	On which entry in Part 1 or Part 2 of Line 4.3 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
	ington, DE 19850		Part 2: Creditors with Nonpriority Unsecured Claim	S
	•	Last 4 digits of account number		
	and Address E Financial Services	On which entry in Part 1 or Part 2 of Line <b>4.6</b> of ( <i>Check one</i> ):	, •	
	E Imperial Hwy	Line 4.0 or (Check one).	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claim	ic.
	, CA 92821		- Fait 2. Greditors with Nonphonty Onsecured Claim	5
		Last 4 digits of account number		
	and Address <b>E Financial Services</b>	On which entry in Part 1 or Part 2 of Line <b>4.7</b> of ( <i>Check one</i> ):		
	E Imperial Hwy	Line 4.1 of (Check one).	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claim	
	, CA 92821		- Fart 2. Creditors with Nonphonty Onsecured Claim	5
		Last 4 digits of account number		
	and Address E Financial Services	On which entry in Part 1 or Part 2 d	· · <u> </u>	
	E Imperial Hwy	Line 4.8 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claim	_
	, CA 92821		Part 2: Creditors with Nonpriority Unsecured Claim	S
		Last 4 digits of account number		
	and Address	On which entry in Part 1 or Part 2 d	· _	
	ystem Inc ox 64378	Line 4.11 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claim	
Saint	Paul, MN 55164		Part 2: Creditors with Nonpriority Unsecured Claim	S
		Last 4 digits of account number		
	and Address	On which entry in Part 1 or Part 2 d	,	
	/ Funding/Resurgent Capital ox 1269	Line 4.12 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claim	
	nville, SC 29602	1	■ Part 2: Creditors with Nonpriority Unsecured Claim	S
		Last 4 digits of account number		
Name	and Address	On which entry in Part 1 or Part 2 d	lid you list the original creditor?	

Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor 1 Charles C Ainsworth		Case number (if known)				
MidAmerica Bank & Trust Company 5109 S Broadband Lane Sioux Falls, SD 57109	Line 4.14 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims				
Cloux Falls, GD 37 103	Last 4 digits of account number	Last 4 digits of account number				
Name and Address	On which entry in Part 1 or Part 2	,				
Security Check	Line <u>4.18</u> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims				
2653 W Oxford Loop Oxford, MS 38655		■ Part 2: Creditors with Nonpriority Unsecured Claims				
CAICIU, IIIC COCCC	Last 4 digits of account number					
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?				
Southern Financial Systems, Inc	Line <b>4.20</b> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims				
Po Box 15203 Hattiesburg, MS 39407		■ Part 2: Creditors with Nonpriority Unsecured Claims				
Tractices drig, into 05407	Last 4 digits of account number					
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?				
Southwest Credit Systems	Line <b>4.22</b> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims				
4120 International Parkway Carrollton, TX 75007		■ Part 2: Creditors with Nonpriority Unsecured Claims				
ouromon, 17 10001	Last 4 digits of account number					

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 22,511.55
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 22,511.55

Fill in this inform	Fill in this information to identify your case:					
Debtor 1	Charles C Ainswo	orth				
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ban	kruptcy Court for the:	SOUTHERN DISTRICT	OF MISSISSIPPI			
Case number					☐ Check if this is an amended filing	

#### Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

- 1	Person or	Company with Name, Number	whom you have the r, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				<del></del>
	Number	Street			<u> </u>
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			<del>_</del>
	City		State	ZIP Code	<u> </u>
2.3					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.4			<u> </u>		
	Name				<u> </u>
	Number	Street			
	City		State	ZIP Code	_
2.5					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>

Fill in this i	nformation to identify your	case:			
Debtor 1	Charles C Ainswe	orth			
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	SOUTHERN DISTRICT	OF MISSISSIPPI		
Case numbe	er				
(if known)				Check if the amended the	
Official	Form 106H				
	ıle H: Your Cod	ebtors			12/15
<del>5011041</del>	alo III Tour oou	001010			12,10
■ No □ Yes  2. Withi	ou have any codebtors? (If some some some some some some some some	lived in a community pr	operty state or territor	ry? (Community property states and territories	include
☐ Yes.  3. In Columnin line 2	2 again as a codebtor only i	ors. Do not include your f that person is a guaran	spouse as a codebto	if your spouse is filing with you. List the p sure you have listed the creditor on Sched 16G). Use Schedule D, Schedule E/F, or Sch	ule D (Officia
out Col					
	olumn 1: Your codebtor ame, Number, Street, City, State and Zl	P Code		Column 2: The creditor to whom you o Check all schedules that apply:	we the debt
3.1				☐ Schedule D, line	
	ame			☐ Schedule E/F, line	
				☐ Schedule G, line	
	umber Street	01-11-	71D O - 4-	_	
Ci	nty	State	ZIP Code		
3.2				☐ Schedule D, line	
	ame			☐ Schedule E/F, line	
				☐ Schedule G, line	
	umber Street			_	
Ci	ity	State	ZIP Code		

Schedule H: Your Codebtors

Fill	in this information to	o identify your c	asa.					1				
	btor 1	Charles C A										
	btor 2 buse, if filing)						_					
Uni	ited States Bankrup	tcy Court for the	: SOUTHERN DISTRIC	T OF MIS	SISSIPPI							
(If kı	se number	4001		-				□ A □ A		ed filing ent showing	g postpetition	chapter
	fficial Form							M	IM / DD/ Y	YYY		
Be a sup spo atta	plying correct info buse. If you are sep ich a separate shee	ccurate as poss rmation. If you arated and you	Sible. If two married peo are married and not filir r spouse is not filing wi On the top of any additi	ng jointly, ith you, do	and your so	pouse le infor	is liv matio	ing with on about	you, inclu your spo	ude inform ouse. If mo	nation about y ore space is n	your eeded,
1.	Fill in your emplo	oyment		Debtor	1				Debtor 2	or non-fil	ling spouse	
	If you have more	than one job,		■ Emp					☐ Emplo		g openee	
	attach a separate information about employers.		Employment status  Occupation		Not employed				☐ Not er	mployed		
	Include part-time, self-employed wo		Employer's name	Central Heating and Cooling of MS				ng of				
	Occupation may it or homemaker, if				156 Marshall Rd Brandon, MS 39047							
			How long employed to	here?	2 and 1/	2 mon	ths		_			
Pa	rt 2: Give Det	ails About Mor	nthly Income									
	imate monthly incouse unless you are s		ate you file this form. If	you have r	nothing to re	port for	any I	line, write	\$0 in the	space. Inc	lude your non	-filing
	ou or your non-filing e space, attach a se		ore than one employer, co	ombine the	information	for all e	emplo	oyers for	that perso	on on the lir	nes below. If y	ou need
								For Dek	otor 1		otor 2 or ng spouse	
2.			ry, and commissions (becalculate what the month)			2.	\$	5	016.25	\$	N/A	
3	Estimate and list	monthly overt	ime nav			3	<b>2</b> +		0.00	<b></b> \$	N/A	

5,016.25

\$

N/A

Calculate gross Income. Add line 2 + line 3.

Deb	tor 1	Charles C Ainsworth	-	C	Case nur	mber ( <i>if kn</i>	own)				
					For De				r Debtor n-filing s		
	Cop	by line 4 here	4.		\$	5,016	.25	\$_		N/A	_
5.	List	all payroll deductions:									
0.	5a.	Tax, Medicare, and Social Security deductions	5a		\$	905	0.E	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b		\$		.00	\$_		N/A	_
	5c.	Voluntary contributions for retirement plans	5c.		\$		.00	\$	-	N/A	
	5d.	Required repayments of retirement fund loans	5d		\$		.00	\$		N/A	_
	5e.	Insurance	5e		\$	135	.74	\$		N/A	_
	5f.	Domestic support obligations	5f.		\$		.00	\$		N/A	_
	5g.	Union dues	5g		\$		.00	\$_		N/A	_
	5h.	Other deductions. Specify:	_ 5h	.+	\$	0	.00	+ \$_		N/A	<u>.                                      </u>
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	1,041		\$_		N/A	<u>.                                     </u>
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	3,974	.56	\$_		N/A	<u>-</u>
8.	List 8a.	All other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total			•			•			
	O.L.	monthly net income.	8a		\$		.00	\$_		N/A	
	8b.	Interest and dividends  Family support payments that you, a non-filing spouse, or a dependent	8b	٠.	\$	0	.00	\$_		N/A	<u> </u>
	8c.	regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c		\$	0	.00	\$		N/A	
	8d.	Unemployment compensation	8d	١.	\$		.00	\$		N/A	_
	8e.	Social Security	8e	٠.	\$		.00	\$		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.		\$	0	.00	\$_		N/A	_
	8g.	Pension or retirement income	8g		\$		.00	\$		N/A	_
	8h.	Other monthly income. Specify:	8h	.+	\$	0	.00	+ \$_		N/A	<u>.                                    </u>
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	5	0	.00	\$_		N/	A
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	3.9	74.56	+ \$		N/A	= \$	3,974.56
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		· —	-,-		'-			' -	
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not excity:	depe						Schedule	e <i>J</i> . +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The reside that amount on the Summary of Schedules and Statistical Summary of Certainlies							e. 12.	\$	3,974.56
											ly income
13.	Do :	you expect an increase or decrease within the year after you file this form No.	?								
	П	Yes. Explain:									

Fill	in this information to identify your case:					
Deb	otor 1 Charles C Ainsworth			Check	if this is:	
			_	_	n amended filing	
	otor 2  Duse, if filing)				supplement show 3 expenses as of t	ring postpetition chapter the following date:
	,			_		
Unit	ted States Bankruptcy Court for the: SOUTHERN	N DISTRICT OF MISSI	SSIPPI	N	MM / DD / YYYY	
l	nown)					
Of	fficial Form 106J					
So	chedule J: Your Expense	es				12/15
info	as complete and accurate as possible. If two ormation. If more space is needed, attach a mber (if known). Answer every question.	wo married people are another sheet to this f	e filing together, bo orm. On the top of a	th are equal any additior	lly responsible fo nal pages, write y	r supplying correct our name and case
	t 1: Describe Your Household					
1.	Is this a joint case?					
	<ul><li>■ No. Go to line 2.</li><li>□ Yes. Does Debtor 2 live in a separate h</li></ul>	household?				
	□ No	ilousciloiu .				
	☐ Yes. Debtor 2 must file Official Fo	orm 106J-2, Expenses	for Separate Househ	nold of Debto	or 2.	
2.	Do you have dependents? ☐ No	•	·			
	Do not list Debtor 1 and	out this information for ch dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	Do not state the					□ No
	Do not state the dependents names.		Son		6	■ Yes
						□ No
			Daughter		9	■ Yes
						□ No
						☐ Yes
						□ No □ Yes
3.	Do your expenses include ■ No		-			□ res
	expenses of people other than	•				
	yourself and your dependents?	•				
Est exp	t 2: Estimate Your Ongoing Monthly Eximate your expenses as of your bankruptcy benses as of a date after the bankruptcy is a plicable date.	y filing date unless yo				
the	lude expenses paid for with non-cash gove value of such assistance and have include ficial Form 106I.)				Your expe	enses
-	•					
4.	The rental or home ownership expenses payments and any rent for the ground or lot.		nclude first mortgage	4. \$		900.00
	If not included in line 4:					
	4a. Real estate taxes			4a. \$		0.00
	4b. Property, homeowner's, or renter's ins	surance		4b. \$		0.00
	4c. Home maintenance, repair, and upker			4c. \$		0.00
_	4d. Homeowner's association or condomi			4d. \$		0.00
5.	Additional mortgage payments for your re	<b>esidence,</b> such as hor	ne equity loans	5. \$		0.00

Debtor 1	Charles	C Ainsworth	Case nun	mber (if known)	
6. <b>Util</b> i	ities:				
6a.		, heat, natural gas	6a.	. \$	375.00
6b.		wer, garbage collection	6b.	· ·	75.00
6c.		e, cell phone, Internet, satellite, and cable services	6c.		305.00
6d.	Other. Sp		6d.	· : ————	0.00
		ekeeping supplies	7.	· -	900.00
		children's education costs	8.	·	0.00
		lry, and dry cleaning	9.	·	75.00
	•		9. 10.		
	-	products and services		·	100.00
		ntal expenses	11.	. \$	150.00
		. Include gas, maintenance, bus or train fare. ar payments.	12.	. \$	200.00
		clubs, recreation, newspapers, magazines, and books	13.	·	75.00
		ributions and religious donations	14.	·	200.00
		ributions and religious donations	14.	. Ф	200.00
	u <b>rance.</b> not include ir	nsurance deducted from your pay or included in lines 4 or 20.			
	. Life insura	, , ,	15a.	\$	0.00
	. Health ins		15a. 15b.	·	0.00
	.      Health ins .      Vehicle in		15b. 15c.	· -	
				·	137.00
		urance. Specify:	15d.	. \$	0.00
	es. Do not ir cify:	nclude taxes deducted from your pay or included in lines 4 or 20.		. \$	0.00
	-	ease payments:		. Ψ	0.00
		ents for Vehicle 1	17a.	. \$	463.67
		ents for Vehicle 2	17b.	· —	0.00
	. Other. Sp		17c.	·	0.00
	. Other. Sp		17d. 17d.	· -	0.00
		of alimony, maintenance, and support that you did not repo		. Ψ	0.00
		your pay on line 5, Schedule I, Your Income (Official Form 1		. \$	0.00
9. <b>Oth</b>	er payment	s you make to support others who do not live with you.		\$	0.00
	cify:	, , , , , , , , , , , , , , , , , , , ,	19.	·	
		erty expenses not included in lines 4 or 5 of this form or on			
		s on other property	20a.		0.00
	. Real esta		20b.		0.00
		homeowner's, or renter's insurance	20c.	· -	0.00
		nce, repair, and upkeep expenses	20d.	·	0.00
		ner's association or condominium dues	20a. 20e.	·	0.00
		ier s association of condominant dues		· -	
1. <b>O</b> th	er: Specify:		21.	. +\$	0.00
2. <b>Cal</b>	culate your	monthly expenses			
22a	. Add lines 4	through 21.		\$	3,955.67
22b	. Copy line 2	2 (monthly expenses for Debtor 2), if any, from Official Form 106	SJ-2	\$	,
		a and 22b. The result is your monthly expenses.		\$	3,955.67
220	. Add iiiic 22	a and 225. The result is your monthly expenses.		Ψ	3,933.01
	-	monthly net income.			
23a	. Copy line	12 (your combined monthly income) from Schedule I.	23a.	. \$	3,974.56
23b	. Copy you	r monthly expenses from line 22c above.	23b.	\$	3,955.67
	_				
23c		rour monthly expenses from your monthly income.	23c.	. \$	18.89
		•			
24. <b>Do</b> 3	you expect	an increase or decrease in your expenses within the year af	ter you file thi	s form?	
		ou expect to finish paying for your car loan within the year or do you expect	ct your mortgage	payment to increase	or decrease because of a
_		terms of your mortgage?			
<b>—</b> 1					
	res.	Explain here:			

Fill in this informa	ation to identify your o	case:			
Debtor 1	Charles C Ainswo	orth			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bank	cruptcy Court for the:	SOUTHERN DISTRICT	OF MISSISSIPPI		
Case number(if known)					☐ Check if this is an amended filing
Official Form <b>Declaration</b>	-	ın Individual	Debtor's Schee	dules	12/15
	U.S.C. §§ 152, 1341, 1		ruptcy case can result in fine	s up to \$250,000, o	i imprisonment for up to 20
Did you pay o	or agree to pay some	one who is NOT an attorr	ney to help you fill out bankru	ıptcy forms?	
■ No					
_ □ Yes. Na	me of person				tcy Petition Preparer's Notice, d Signature (Official Form 119)
	of perjury, I declare true and correct.	that I have read the sumr	nary and schedules filed with	n this declaration ar	nd
X /s/ Charl	es C Ainsworth		X		
	C Ainsworth of Debtor 1		Signature of Debto	or 2	
Date <b>M</b> a	arch 20, 2019				

Official Form 106Dec

		nation to identify you					
De	btor 1	Charles C Ainsv	vorth  Middle Name		Last Name		
	btor 2						
(Spo	ouse if, filing)	First Name	Middle Name		Last Name		
Uni	ited States Bar	nkruptcy Court for the:	SOUTHERN DISTRICT	OF MIS	SSISSIPPI		
Ca	se number						
(if kr	nown)						☐ Check if this is an
							amended filing
~	· · · · -	407					
	ficial For						
St	atement	of Financial	Affairs for Indivi	dual	s Filing for B	ankruptcy	4/16
			ible. If two married people				
		ore space is needed, i). Answer every que	attach a separate sheet to stion.	tnis to	orm. On the top of any	additional pages, wri	te your name and case
Pai	rt 1: Give D	etails About Your Ma	arital Status and Where Yo	u Lived	l Refore		
				u Liveu	Belore		
1.	What is your	current marital statu	ıs?				
	☐ Married						
	Not mari	ried					
2.	During the la	ast 3 years, have you	lived anywhere other than	where	you live now?		
	□ No						
	_	t all of the places you l	ived in the last 3 years. Do r	not inclu	ıde where vou live now		
		ior Address:	Dates Debtor 1		Debtor 2 Prior Ad		Dates Debtor 2
	Debior 1 Pri	or Address.	lived there		Debiol 2 Phot Au	uress.	lived there
	400 Cedar		From-To:	10.1-	☐ Same as Debtor 1		Same as Debtor 1
	Pearl, MS	39208	February 201 September 2				From-To:
			•				
	521 Ainsw		From-To: September 2	<b>01</b> 8	☐ Same as Debtor 1		Same as Debtor 1
	Braxton, M	15 39044	to aprox 2008				From-To:
			<u> </u>				
3.	Within the la	st 8 years, did you e	ver live with a spouse or le	gal equ	uivalent in a commun	ity property state or te	rritory? (Community property
stat	es and territorie	es include Arizona, Ca	lifornia, Idaho, Louisiana, Ne	evada, N	New Mexico, Puerto Ri	co, Texas, Washington	and Wisconsin.)
	■ No						
	☐ Yes. Ma	ke sure you fill out Sci	hedule H: Your Codebtors (C	Official F	Form 106H).		
Pai	rt 2 Explair	n the Sources of You	r Income				
ı aı	LXPIAII	Title Cources of Tou	i income				
4.	Fill in the tota	I amount of income yo	nployment or from operation of the control of the c	all busin	nesses, including part-	time activities.	calendar years?
	ii you are iiiii	g a joint case and you	Thave income that you recen	re toget	iner, list it offiny office diff	del Debiol 1.	
	□ No						
	Yes. Fill	in the details.					
			Debtor 1			Debtor 2	
			Sources of income Check all that apply.	(bef	oss income fore deductions and clusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Charles C Ainsworth		Case	Case number (if known)			
	Debtor 1		Debtor 2			
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of incor Check all that app			
From January 1 of current year until the date you filed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$8,714.14	☐ Wages, comm bonuses, tips	issions,		
	☐ Operating a business		Operating a bu	usiness		
For last calendar year: (January 1 to December 31, 2018)	■ Wages, commissions, bonuses, tips	\$61,062.00	☐ Wages, comm bonuses, tips	issions,		
	☐ Operating a business		Operating a bu	usiness		
For the calendar year before that: (January 1 to December 31, 2017)	■ Wages, commissions, bonuses, tips	\$47,570.00	☐ Wages, comm bonuses, tips	issions,		
	☐ Operating a business		Operating a bu	usiness		
■ No □ Yes. Fill in the details.	Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and	Debtor 2 Sources of incor Describe below.	me Gross income (before deductions and exclusions)		
		exclusions)		,		
Part 3: List Certain Payments You	Made Before You Filed for	Bankruptcy				
		imer debts. Consumer debts	are defined in 11 U	.S.C. § 101(8) as "incurred by an		
☐ No. Go to line ☐ Yes List below paid that c not include	each creditor to whom you pai	d a total of \$6,425* or more interest for domestic support obligation bankruptcy case.	n one or more paym ations, such as child	ents and the total amount you I support and alimony. Also, do		
	or both have primarily consu ore you filed for bankruptcy, di		of \$600 or more?			
■ No. Go to line						
include pa	each creditor to whom you pai yments for domestic support o or this bankruptcy case.			u paid that creditor. Do not so, do not include payments to an		
Creditor's Name and Address	Dates of payme	nt Total amount paid	Amount you still owe	Was this payment for		

Case number (if known)

<b>7</b> .	Within 1 year before you filed for bankrupt <i>Insiders</i> include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	artners; relatives of any generation control, or owner of 20% of	eral partners; partner r more of their voting	erships of which g securities; an	n you are a gene d any managing	ral partner; corporation agent, including one fo	
	■ No						
	Yes. List all payments to an insider.  Insider's Name and Address	Dates of payment	Total amount paid	Amount yo		r this payment	
3.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos  No					debt that benefited an	
	Yes. List all payments to an insider						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount yo still ow		r this payment ditor's name	
Pai	rt 4: Identify Legal Actions, Repossession	ns. and Foreclosures					
	List all such matters, including personal injury modifications, and contract disputes.  No  Yes. Fill in the details.	cases, small claims actions	s, divorces, collectio	n suits, paterni	ty actions, suppo	rt or custody	
	Case title Case number	Nature of the case	Court or agency		Status of t	he case	
	Advanced Recovery Systems Inc vs CHARLES AINSWORTH BK61PG352	SMALL CLAIMS JUDGMENT	SIMPSON JUSTICE COURT		☐ Pendin☐ On app☐ Conclu	eal	
					- 458.00		
	First Tower Loan, LLC vs Charles Ainsworth 19-251	suit by creditor	Rankin County PO Box 1599 Brandon, MS 3		☐ Pending ☐ On appeal ☐ Concluded		
0.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below		erty repossessed, f	oreclosed, ga	rnished, attache	ed, seized, or levied?	
	<ul><li>No. Go to line 11.</li><li>Yes. Fill in the information below.</li></ul>						
	Creditor Name and Address	Describe the Property	Describe the Property		ate	Value of the property	
		Explain what happened					
1.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec No Yes. Fill in the details.		uding a bank or fil	nancial institut	tion, set off any	amounts from your	
	Creditor Name and Address				ate action was	Amount	
2.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a  ■ No □ Yes		rty in the possess			efit of creditors, a	

Debtor 1 Charles C Ainsworth

Der	Charles C Ainsworth		Case number	(If Known)		
Par	t 5: List Certain Gifts and Contributions					
			did you give any gifts with a total value of more th	nan \$600 per person	?	
	Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift and Address:		Describe the gifts	Dates you gave the gifts	Value	
14.	Within 2 years before you filed for bankrup  ■ No  □ Yes. Fill in the details for each gift or cor		did you give any gifts or contributions with a tota	I value of more than	\$600 to any charity?	
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Describe what you contributed	Dates you contributed	Value	
Par	t 6: List Certain Losses					
<ul> <li>Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disast or gambling?</li> <li>■ No</li> <li>□ Yes. Fill in the details.</li> </ul>						
	how the loss occurred	nclude	be any insurance coverage for the loss the amount that insurance has paid. List pending nce claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost	
Par	t 7: List Certain Payments or Transfers					
16.	consulted about seeking bankruptcy or pr	eparii	d you or anyone else acting on your behalf pay on gabankruptcy petition? s, or credit counseling agencies for services required		rty to anyone you	
	□ No					
	Yes. Fill in the details.					
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	111	Description and value of any property transferred	Date payment or transfer was made	Amount of payment	
	Charles C. Julian, Jr. PO Box 109 Brandon, MS 39043 charliejulian@yahoo.com		Attorney Fees		\$815.00	
17.	Within 1 year before you filed for bankrupt promised to help you deal with your credit Do not include any payment or transfer that y	tors o		or transfer any prope	rty to anyone who	
	■ No					
	Yes. Fill in the details.  Person Who Was Paid		Description and value of any property	Date payment	Amount of	
	Address		transferred	or transfer was made	payment	

Debtor 1 Charles C Ainsworth

Case number (if known)

18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?  Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not									
	include gifts and transfers that you have already listed on this statement.  No									
	☐ Yes. Fill in the details.									
	Person Who Received Transfer Address	Description and v property transferr		Describe any property or payments received or de paid in exchange						
	Person's relationship to you									
19.	Within 10 years before you filed for bankrupto beneficiary? (These are often called asset-prote No Yes. Fill in the details.		y property to a se	lf-settled trust or similar de	evice of which you are a					
		Description and v	ralisa of the muchos	utv. tuomofound	Data Transfer was					
	Name of trust	Description and v	alue of the proper	rty transferred	Date Transfer was made					
Par	rt 8: List of Certain Financial Accounts, Instr	ruments, Safe Deposit	Boxes, and Stora	age Units						
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or	·		•	•					
	houses, pension funds, cooperatives, associa  No  Yes, Fill in the details.	ations, and other finar	ncial institutions.							
		ast 4 digits of	Type of account	or Date account was	s Last balance					
		account number instrument		closed, sold, moved, or transferred	before closing or transfer					
21.	Do you now have, or did you have within 1 yearsh, or other valuables?	ar before you filed for	bankruptcy, any	safe deposit box or other o	lepository for securities,					
	■ No □ Yes. Fill in the details.									
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it?  Address (Number, Street, City, State and ZIP Code)		escribe the contents	Do you still have it?					
22.	Have you stored property in a storage unit or	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?								
	■ No □ Yes. Fill in the details.									
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		escribe the contents	Do you still have it?					
Par	rt 9: Identify Property You Hold or Control fo	r Someone Fise								
23.			ude any property y	you borrowed from, are sto	oring for, or hold in trust					
	■ No □ Yes. Fill in the details.									
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		escribe the property	Value					
Par	rt 10: Give Details About Environmental Inform	,								
For	the purpose of Part 10, the following definition	s apply:								

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or

Debtor 1 Charles C Ainsworth

Case number (if known)

Par		Sign Balow								
	Name Address (Number, Street, City, State and ZIP Code)		Dat	ate Issued						
	=	No Yes. Fill in the details below.								
28.		nin 2 years before you filed for bankrupt itutions, creditors, or other parties.	tcy, d	id you give a financial statement	to ar	nyone about your business? Inclu	ude all financial			
	(Number, Street, City, State and ZIP Code)		Nan	ne of accountant or bookkeeper		Dates business existed				
	Add	siness Name dress	Des	Describe the nature of the business		Employer Identification numbe Do not include Social Security				
	Yes. Check all that apply above and fill in the details below for each business.									
	■ No. None of the above applies. Go to Part 12.									
	☐ An owner of at least 5% of the voting or equity securities of a corporation									
	☐ An officer, director, or managing executive of a corporation									
	☐ A partner in a partnership									
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)									
		☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time								
27.	With	nin 4 years before you filed for bankrupt	tcy, d	id you own a business or have a	ny of	the following connections to any	/ business?			
Par	t 11:	Give Details About Your Business or	Conn	ections to Any Business						
	Cas	se Title se Number		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ture of the case	Status of the case			
	Yes. Fill in the details.									
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.  No									
	Name of site Address (Number, Street, City, State and ZIP Code)			Governmental unit Address (Number, Street, City, State an ZIP Code)		Environmental law, if you know it	Date of notice			
		No Yes. Fill in the details.	Governmental unit		Environmental law # yeu	Date of notice				
25.	Have you notified any governmental unit of any release of hazardous material?									
		me of site dress (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State an ZIP Code)	nd	Environmental law, if you know it	Date of notice			
		No Yes. Fill in the details.								
24.	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?									
Rep	ort a	II notices, releases, and proceedings th	at yo	u know about, regardless of whe	n the	ey occurred.				
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.									
_	to o	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.								
	_	ilations controlling the cleanup of these			law	whether you now own operate	or utilize it or used			

Part 12: Sign Below

I have read the answers on this *Statement* of *Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

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Debtor	1 Charles C Ain	sworth		Case number (if known)
with a b		result in fines up to \$25	se statement, concealing p 0,000, or imprisonment for	operty, or obtaining money or property by fraud in connection up to 20 years, or both.
/s/ Ch	arles C Ainsworth	1		
	es C Ainsworth ure of Debtor 1		Signature of Debtor	2
Date	March 20, 2019		Date	
Did you	ı attach additional p	ages to Your Statement of	of Financial Affairs for Indi	viduals Filing for Bankruptcy (Official Form 107)?
■ No				
☐ Yes				
Did you ■ No	ı pay or agree to pay	someone who is not an	attorney to help you fill ou	t bankruptcy forms?
☐ Yes.	Name of Person	. Attach the Bankruptcy	/ Petition Preparer's Notice, I	Declaration, and Signature (Official Form 119).

Fill in this infor	mation to identify your	case:			
Debtor 1	Charles C Ainswo				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	SOUTHERN DIST	RICT OF MISSISSIPPI		
Case number (if known)				□ Check	if this is an
					ded filing
			iduals Filing Under Ch	apter 7	12/15
_	re claims secured by you				
You must file th	ever is earlier, unless th	ithin 30 days after	ot expired. you file your bankruptcy petition or by the e time for cause. You must also send copic		
	eople are filing together nd date the form.	in a joint case, bot	th are equally responsible for supplying co	orrect information. Both	debtors must
	and accurate as possib our name and case nun		needed, attach a separate sheet to this fo	rm. On the top of any ad	lditional pages,
Part 1: List Y	our Creditors Who Have	Secured Claims			
1 For any credit	tors that you listed in Pa	rt 1 of Schedule D:	: Creditors Who Have Claims Secured by F	Property (Official Form 1	06D), fill in the
information b			What do you intend to do with the prope secures a debt?	erty that Did you cla	aim the property
				uo onompi	
Creditor's (	Cnac - Ms104		☐ Surrender the property.	□No	
name:	511aC - WIS 104		☐ Surrender the property. ☐ Retain the property and redeem it.	□ NO	
Description of	2008 Honda Civic		Retain the property and enter into a Reaffirmation Agreement.	■ Yes	
property securing debt	:		☐ Retain the property and [explain]:		
For any unexpir in the information	on below. Do not list rea	se that you listed it	in Schedule G: Executory Contracts and Uexpired leases are leases that are still in e he trustee does not assume it. 11 U.S.C. §	ffect; the lease period ha	al Form 106G), fill as not yet ended.
Describe your	unexpired personal prop	erty leases		Will the lease b	e assumed?
Lessor's name: Description of le	ased			□ No	
Property:				☐ Yes	
Lessor's name: Description of le	ased			□ No	
Property:				☐ Yes	
Lessor's name:				□ No	
Official Form 108		Statement of In	tention for Individuals Filing Under Chapte	er 7	page 1

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Del	otor 1	Charles C Ainsworth	Case number (if know	wn)
Do	acrintics	n of leased		
	perty:	i oi leased		☐ Yes
Les	sor's na	ame:		□ No
		n of leased		□ N0
	perty:			☐ Yes
Les	sor's n	ame:		□ No
		n of leased		
Pro	perty:			☐ Yes
	sor's n			□ No
		n of leased		_
PIC	perty:			☐ Yes
	sor's n			□ No
	scriptior perty:	n of leased		
	porty.			☐ Yes
Par	t 3:	Sign Below		
		alty of perjury, I declare that I have indica nat is subject to an unexpired lease.	ated my intention about any property of my estate that	secures a debt and any personal
X		harles C Ainsworth	X	
	Char	les C Ainsworth	Signature of Debtor 2	
	Signa	ature of Debtor 1		
	Date	March 20, 2019	Date	

Fill in this infor	mation to identify your case:		Ch	eck one bo	ox only as d	irected in this form and	d in Form
Debtor 1	Charles C Ainsworth		123	2A-1Supp:			
Debtor 2 (Spouse, if filing)				☐ 1. There	e is no pres	umption of abuse	
	Bankruptcy Court for the: Southern District of	Mississippi		appl	ies will be n	o determine if a presui nade under <i>Chapter</i> 7	•
Case number				_	,	cial Form 122A-2).	,
						does not apply now be service but it could ap	
Official E	orm 122A - 1			☐ Check	if this is a	n amended filing	
	7 Statement of Your Cur	rent Mor	nthly Inc	ome			12/15
attach a separate case number (if qualifying militar	and accurate as possible. If two married people at a sheet to this form. Include the line number to with known). If you believe that you are exempted from a service, complete and file Statement of Exempted Iculate Your Current Monthly Income	nich the addition n a presumption	nal information a of abuse becau	applies. On ise you do	the top of an	ny additional pages, wri narily consumer debts o	te your name and or because of
	vour marital and filing status? Check one onl	 V.					
	arried. Fill out Column A, lines 2-11.	,					
	ed and your spouse is filing with you. Fill ou	both Columns	A and B. lines	2-11.			
	ed and your spouse is NOT filing with you.		·				
_	ng in the same household and are not legal	•	•	lumns A a	nd B. lines 2	2-11.	
per	ng separately or are legally separated. Fill on alty of perjury that you and your spouse are leng apart for reasons that do not include evading.	gally separated	l under nonban	nkruptcy la	w that applie	es or that you and you	
101(10A). For the 6 months,	erage monthly income that you received from all serage monthly income that you received from all seragements, if you are filing on September 15, the 6-month and divide the total of the same rental property, put the income from that property.	onth period would by 6. Fill in the res	be March 1 throusult. Do not include	ugh August de any incor	31. If the amo	ount of your monthly incomore than once. For examp	ne varied during ble, if both
				Column A Debtor 1	1	Column B Debtor 2 or non-filing spouse	
	ss wages, salary, tips, bonuses, overtime, anductions).	nd commissio	ons (before all	\$	5,016.25	\$	
•	and maintenance payments. Do not include payments.	payments from	a spouse if	\$	0.00	\$	
of you or from an u and room	nts from any source which are regularly pa your dependents, including child support. nmarried partner, members of your household, mates. Include regular contributions from a spo to not include payments you listed on line 3.	Include regular your depender	contributions nts, parents,	\$	0.00	\$	
5. Net incom	ne from operating a business, profession, o						
_			tor 1				
	eipts (before all deductions)	\$ <u>0.00</u> -\$ <u>0.00</u>					
•	and necessary operating expenses hly income from a business, profession, or farn	0.00	Copy here ->	. \$	0.00	\$	
	ne from rental and other real property	ΙΦ		<u> </u>		<u> </u>	
J. 1100 III 001		Deb	tor 1				
Gross red	eeipts (before all deductions)	\$ 0.00					
	and necessary operating expenses	-\$ 0.00					
	nly income from rental or other real property	\$ 0.00	Copy here ->	•\$	0.00	\$	
7. Interest,	dividends, and royalties			\$	0.00	\$	

Official Form 122A-1

				Column A Debtor 1		Column B Debtor 2 o non-filing		
8.	Unemployment compensation			\$	0.00	\$		
	Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:	t received was a benef	it under	·		·		
	For you \$ For your spouse \$	0.	00					
	For your spouse \$							
9.	<b>Pension or retirement income.</b> Do not include any an benefit under the Social Security Act.	nount received that wa	s a	\$	0.00	\$		
10.	Income from all other sources not listed above. Spe Do not include any benefits received under the Social Streetived as a victim of a war crime, a crime against hur domestic terrorism. If necessary, list other sources on a total below.	Security Act or paymen manity, or international	its or					
	·			\$	0.00	\$		
				\$	0.00	\$		
	Total amounts from separate pages, if any.		+	\$	0.00	\$		
11.	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the total for Column		\$	5,016.25	+ \$		= \$	5,016.25
							Total o	current monthly
Part	2: Determine Whether the Means Test Applies t	o You						
	•							
12.	Calculate your current monthly income for the year	Follow these steps:						
	12a. Copy your total current monthly income from line	11		Сор	y line 11 h	nere=>	\$	5,016.25
	Multiply by 12 (the number of months in a year)						X	
	12b. The result is your annual income for this part of th	e form				12b	. \$	60,195.00
13.	Calculate the median family income that applies to	you. Follow these step	os:					
	Fill in the state in which you live.	MS						
	Fill in the number of people in your household.	3						
	Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the bank	online using the link sp	pecified i	n the separa	ate instruc	13. tions	\$	55,217.00
14.	How do the lines compare?							
	14a. Line 12b is less than or equal to line 13. O Go to Part 3.	n the top of page 1, ch	eck box	1, There is	no presum	ption of abus	e.	
	14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	of page 1, check box 2	, The pre	esumption of	abuse is	determined b	y Form 1	22A-2.
Part								
	By signing here, I declare under penalty of perjury	that the information or	n this sta	tement and	in any atta	achments is to	ue and c	orrect.
		mar me memanemen			,		ao aa o	ooo
	X /s/ Charles C Ainsworth							
	Charles C Ainsworth Signature of Debtor 1							
	Date March 20, 2019 MM / DD / YYYY							
	If you checked line 14a, do NOT fill out or file Forr	n 122A-2						
	If you checked line 14b, fill out Form 122A-2 and f							
	ii you onconcumic 170, iii out i oiiii 122A-2 anu i	no it with this lotti.						

**Charles C Ainsworth** 

Debtor 1 Charles C Ainsworth Case number (if known)

### **Current Monthly Income Details for the Debtor**

**Debtor Income Details:** 

Income for the Period 09/01/2018 to 02/28/2019.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: employment

Year-to-Date Income:

Last Year:

Starting Year-to-Date Income: \$\\\
\begin{align\*}
\

This Year:

Current Year-to-Date Income: \$8,714.14 from check dated 2/28/2019 .

Income for six-month period (Current+(Ending-Starting)): \$30,097.49 .

Average Monthly Income: **\$5,016.25** 

Deb (Spo Unit	in this information to identify your case:  otor 1		heck the appropriate box as directed in nes 40 or 42:  According to the calculations required by this Statement:  1. There is no presumption of abuse.  2. There is a presumption of abuse.  Check if this is an amended filing
	ficial Form 122A - 2 apter 7 Means Test Calculation		04/16
	Il out this form, you will need your completed copy of Chapter 7 State		
spac addit		nber to which additional	information applies. On the top any
1.	Copy your total current monthly income. Copy line 1	1 from Official Form 122	A-1 here=> \$ 5,016.25
2.	Did you fill out Column B in Part 1 of Form 122A-1?		
	■ No. Fill in \$0 for the total on line 3.		
	☐ Yes. Is your spouse Filing with you?		
	☐ No. Go to line 3.		
	☐ Yes. Fill in \$0 the total on line 3.		
3.	Adjust your current monthly income by subtracting any part of your household expenses of you or your dependents. Follow these steps:  On line 11, Column B of Form 122A–1, was any amount of the income yo		
	expenses of you or your dependents?	a reported for your spous	one regularly about or the nouseriola
	■ No. Fill in 0 for the total on line 3.		
	☐ Yes. Fill in the information below:		
	State each purpose for which the income was used	Fill in the amour	nt you
	For example, the income is used to pay your spouse's tax debt or to support other than you or your dependents.	are subtracting to	
		\$	_
		\$	
		Ψ	_
		\$	_
	Total.	\$0.00	_
		<del></del>	Copy total here=> \$ 0.00

Official Form 122A-2

4. Adjust your current monthly income. Subtract line 3 from line 1.

5,016.25

art 2	Calculate Your Deductions from Your Income		
to a	Internal Revenue Service (IRS) issues National and I Inswer the questions in lines 6-15. To find the IRS sta Tructions for this form. This information may also be a	ndards, go online	using the link specified in the separate
you	duct the expense amounts set out in lines 6-15 regardless r actual expenses if they are higher than the standards. Do tome in line 3 and do not deduct any operating expenses t	o not deduct any ar	nounts that you subtracted fro your spouse's
If yo	our expenses differ from month to month, enter the average	ge expense.	
Wh	enever this part of the from refers to you, it means both yo	ou and your spouse	if Column B of Form 122A-1 is filled in.
5.	The number of people used in determining your dec	ductions from inco	me
	Fill in the number of people who could be claimed as explus the number of any additional dependents whom yo the number of people in your household.		
Nat	ional Standards You must use the IRS National	al Standards to answ	ver the questions in lines 6-7.
<ul><li>6.</li><li>7.</li></ul>	Food, clothing, and other items: Using the number of Standards, fill in the dollar amount for food, clothing, and Out-of-pocket health care allowance: Using the number the dollar amount for out-of-pocket health care. The number people who are 65 or older-because older people have higher than this IRS amount, you may deduct the additional standard process.	d other items.  per of people you en  mber of people is sp  a higher IRS allowa	tered in line 5 and the IRS National Standards, fill in it into two categoriespeople who are under 65 and ance for health care costs. If your actual expenses are
Pec	ple who are under 65 years of age		
	7a. Out-of-pocket health care allowance per person	\$52	
	7b. Number of people who are under 65	X3	
	7c. <b>Subtotal.</b> Multiply line 7a by line 7b.	\$156.00	Copy here=> \$156.00
Pec	ople who are 65 years of age or older		
	7d. Out-of-pocket health care allowance per person	\$114	
	7e. Number of people who are 65 or older	X0	
	7f. <b>Subtotal.</b> Multiply line 7d by line 7e.	\$0.00	Copy here=> +\$
	7g. T <b>otal.</b> Add line 7c and line 7f		\$ 156.00 Copy total here=> \$ 156.00

**Charles C Ainsworth** 

Debtor 1	C	harles C	C Ainswo	rth				Case number	(if known)			
Loca	al St	andards	You mus	t use the IRS Local	Standards to ans	swer the que	stions in line	es 8-15.				
			ation from oses into t	the IRS, the U.S. Two parts:	Гrustee Program	n has divided	d the IRS Lo	ocal Stand	ard for housin	g for		
		•		surance and oper	• .							
-	lous	ing and u	tilities - M	ortgage or rent ex	penses							
To fi	ind th	ne chart, g	o online us	lines 8-9, use the sing the link specific ble at the bankrupt	ed in the separate	•		n.				
8.		_		Insurance and op ed for your county fo		•				5, fill \$		548.00
9.	Ηοι	using and	utilities -	Mortgage or rent	expenses:							
	9a.			of people you enter ty for mortgage or i					<b>\$</b> 1,	044.00		
	9b.	Total ave	erage mon	thly payment for all	mortgages and c	other debts se	ecured by yo	our home.				
		contractu	ually due to	al average monthly each secured cree on divide by 60.								
		Name of	the credito	or		Average m	nonthly					
		-NONE-	-			\$						
				Total average mor	nthly payment	\$	0.00	Copy here=>	-\$	0.00	Repeat this amount on line 33a.	
	9c.	Net mort	gage or re	nt expense.								
				tal average monthly this amount is less				\$	1,044.00	Copy here=>	\$	1,044.00
10.				S. Trustee Progra of your monthly e					g is incorrect	and	\$	0.00
	Ex	plain why:										
11.	Loc	al transp	ortation ex	xpenses: Check th	e number of vehi	cles for whicl	h you claim	an ownersh	nip or operating	expense.		
		). Go to lin	ne 14.									
	_	1. Go to lin										
			Go to line	12.								

Official Form 122A-2

12. **Vehicle operation expense:** Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the *Operating Costs* that apply for your Census region or metropolitan statistical area.

196.00

13.	You	may	wnershi not claim n two veh	the exp	i <b>se ex</b> pense i	<b>pense:</b> Us f you do no	ing the IRS Local ot make any loan	Standards or lease p	s, calculate the ayments on th	e net c e veh	ownership icle. In ad	o or lease e ddition, you	expense for each may not claim th	vehicle below. ne expense for
Vel	hicle '	1	Describ	e Vehic	le 1:	2008 Ho	nda Civic							
13a.	Owne	ershi	p or leas	ing costs	s using	g IRS Loca	l Standard			:	\$	497.00		
13b.		-	monthly p	•			ured by Vehicle 1							
	are c	contra		ue to ea	ch se		here and on line itor in the 60 mon			nt				
		Nam	e of eac	h credit	or for	Vehicle 1		Average paymer	e monthly nt					
	_	Cna	ıc - Ms1	04				\$	228.70					
				Т	otal A	verage Mo	onthly Payment	\$	228.70	Cop	-	228	Repeat this amount on line 33b.	
13c.				•		e expense f this amou	unt is less than \$0	, enter \$0.			\$	268.30	Copy net Vehicle 1 expense here => \$	268.30
Ve	hicle 2	2	Describ	e Vehic	le 2:									
13d.	Owne	ershi	p or leas	ing costs	s using	IRS Loca	l Standard			;	\$	0.00		
13e.			monthly phicles.	ayment	for all	debts sec	ured by Vehicle 2	. Do not in	clude costs for	r				
		Nam	ne of eac	h credit	or for	Vehicle 2		Average paymer	e monthly nt					
	_							_ \$						
				Т	otal A	verage Mo	onthly Payment	\$		Cop here		0.0	Repeat this amount on line 33c.	
13f.						e expense f this amou	ınt is less than \$0	, enter \$0.			\$	0.00	Copy net Vehicle 2 expense here => \$	0.00
14.							imed 0 vehicles in ess of whether you				Standard	s, fill in the	Public \$	0.00
15.	also	dedu	ct a publ	ic transp	ortatio	on expense	e: If you claimed on the property of the prope	hat you b						0.00

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Other Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories. 16. Taxes: The total monthly amount that you will actually owe for federal, state and local taxes, such as income taxes, self-employment taxes, Social Security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. 905.95 Do not include real estate, sales, or use taxes. 17. Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs. 0.00 Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings. 18. Life Insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than 0.00 19. Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. 0.00 Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35. 20. Education: The total monthly amount that you pay for education that is either required: as a condition for your job, or 0.00 for your physically or mentally challenged dependent child if no public education is available for similar services. 21. Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. 0.00 Do not include payments for any elementary or secondary school education. 22. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. 0.00 Payments for health insurance or health savings accounts should be listed only in line 25. 23. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment 75.00 expenses, such as those reported on line 5 of Official Form 122A-1, or any amount you previously deducted. 4,577.25 24. Add all of the expenses allowed under the IRS expense allowances. Add lines 6 through 23.

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_					
Add	litional Expense Deductions These are additional dedu	ictions allowed by th	e Means Test.		
	Note: Do not include any e	expense allowances	listed in lines 6-24.		
25.	Health insurance, disability insurance, and health savin insurance, disability insurance, and health savings accounts your dependents.				
	Health insurance \$	135.74			
	Disability insurance \$	0.00			
	Health savings account + \$	0.00			
	Total \$	135.74	Copy total here=>	\$	135.74
	Do you actually spend this total amount?				
	☐ No. How much do you actually spend?				
	■ Yes	\$			
26.	Continued contributions to the care of household or far continue to pay for the reasonable and necessary care and your household or member of your immediate family who is include contributions to an account of a qualified ABLE prog	support of an elderl unable to pay for su	y, chronically ill, or disabled member of och expenses. These expenses may	\$	0.00
27.	<b>Protection against family violence.</b> The reasonably necessafety of you and your family under the Family Violence Presented in the Protection against family violence.	ssary monthly exper	ses that you incur to maintain the se Act or other federal laws that apply.		
	By law, the court must keep the nature of these expenses c	confidential.		\$	0.00
28.	<b>Additional home energy costs.</b> Your home energy costs a line 8.	are included in your	nsurance and operating expenses on		
	If you believe that you have home energy costs that are mo 8, then fill in the excess amount of home energy costs.	ore than the home er	ergy costs included in expenses on line		
	You must give your case trustee documentation of your actuamount claimed is reasonable and necessary.	ual expenses, and y	ou must show that the additional	\$	0.00
29.	Education expenses for dependent children who are yo \$160.42* per child) that you pay for your dependent children public elementary or secondary school.	ounger than 18. The n who are younger t	monthly expenses (not more than nan 18 years old to attend a private or		
	You must give your case trustee documentation of your acticlaimed is reasonable and necessary and not already according to the control of the				
	* Subject to adjustment on 4/01/19, and every 3 years after	that for cases begui	on or after the date of adjustment.	\$	0.00
30.	Additional food and clothing expense. The monthly amo higher than the combined food and clothing allowances in the than 5% of the food and clothing allowances in the IRS National States of the food and clothing allowances in the IRS National States of the food and clothing allowances in the IRS National States of the food and clothing allowances in the IRS National States of the food and clothing allowances in the IRS National States of the food and clothing allowances in the IRS National States of the food and clothing allowances in the IRS National States of the food and clothing allowances in the IRS National States of the food and clothing allowances in the IRS National States of the food and clothing allowances in the IRS National States of the food and clothing allowances in the IRS National States of the food and clothing allowances in the IRS National States of the food and clothing allowances in the IRS National States of the food and clothing allowances in the IRS National States of the food and clothing allowances in the IRS National States of the food and clothing allowances in the IRS National States of the food and clothing allowances in the IRS National States of the food and clothing allowances in the IRS National States of the food and clothing allowances in the IRS National States of the IRS National Stat	he IRS National Star			
	To find a chart showing the maximum additional allowance, instructions for this form. This chart may also be available a				
	You must show that the additional amount claimed is reaso	nable and necessar	<i>/</i> .	\$	0.00
31.	<b>Continuing charitable contributions.</b> The amount that yo instruments to a religious or charitable organization. 26 U.S		ntribute in the form of cash or financial	+\$	200.00
					005 74
32.	Add all of the additional expense deductions. Add lines 25 through 31.			\$	335.74

**Charles C Ainsworth** 

Deduc	ctions	for Debt Payment									
		s that are secured by an inte		n property that you own, includi	ing home	mor	tgages, vehicle				
То	calcul	•	oayme	nt, add all amounts that are contra	actually du	e to	each secured				
		gages on your home:								rerage monthly	,
33a.	Сору	line 9b here						=>	\$	-	00
	Loan	s on your first two vehicles:							-		
3b.	Сору	line 13b here						=>	\$	228.	70
33c.								=>	\$	0.	00
33d.		ther secured debts:							-		
Name (	of each	creditor for other secured debt		Identify property that secures the	debt		Does paym include tax insurance?	es or			
							□ No				
	-NON	E-					☐ Yes		\$		
-									Ψ.		_
							☐ No				
_							D Yes		\$		
							□ No				
							☐ Yes		+\$		
-						_			ΙΨ.		
									Сору		
3e.	Total a	verage monthly payment. Add	lines	33a through 33d		\$_	228.70	<b>1</b>	total here=>	\$ 228	3.70
or	other No.	Go to line 35. State any amount that you m	supposession	ured by your primary residence ort or the support of your deper y to a creditor, in addition to the part of your property (called the <i>cure</i> primation below.	ayments	9,					
Name	of the	creditor	Ide	entify property that secures the deb	t		Total cure amount			Monthly cure	•
-NO	NF-						\$		80 = \$		
						_	<u> </u>		ου —  Ψ		
									Сору		
					Total	\$	0.00	<b>,</b>	total here=>	\$	0.
								_	11616-2	·	
				oriority tax, child support, or ali ankruptcy case? 11 U.S.C. § 507		at					
	No.	Go to line 36.									
	Yes.			e priority claims. Do not include cu	urrent or						
		ongoing priority claims, such		•		Φ.	<b>.</b> -	_		•	_
		Total amount of all past-due	priori	ty claims		\$	0.00	) ÷	60 =	\$	0.

**Charles C Ainsworth** 

For more	eligible to file a case under Chapter 13? 11 U.S.C. § information, go online using the link for Bankruptcy Basons for this form. Bankruptcy Basics may also be availab	sics specifie						
□ No.	Go to line 37.							
Yes.	Fill in the following information.							
	Projected monthly plan payment if you were filing under	er Chapter 1	3	\$ 3	00.00			
Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts).								
	To find a list of district multipliers that includes your dis the link specified in the separate instructions for this fo be available at the bankruptcy clerk's office.		Co	py total				
	Average monthly administrative expense if you were fil	ling under C	hapter 13	\$	. ^^	re=> \$	24.30	
	of the deductions for debt payment. es 33e through 36.					\$	253.00	
Total Deduc	ctions from Income							
38. Add all d	of the allowed deductions.							
	ne 24, All of the expenses allowed under IRS e allowances	\$	4,577.25	<b>5</b>				
Copy lir	ne 32, All of the additional expense deductions	\$	335.74	<u>l</u>				
Copy lir	ne 37, All of the deductions for debt payment	+\$	253.00	<u>)                                    </u>				
	Total deductions	\$	5,165.99	Copy total	here	=> \$	5,165.99	
Part 3: Def	termine Whether There is a Presumption of Abuse							
39. Calculat	e monthly disposable income for 60 months							
39a. Co	ppy line 4, adjusted current monthly income	\$	5,016.25	5				
39b. Co	ppy line 38, <i>Total deductions</i>	- \$	5,165.99	_ )				
39c. Mc	onthly disposable income. 11 U.S.C. § 707(b)(2). ubtract line 39b from line 39a	\$	-149.74	Copy here=>\$		-149.74		
For the	next 60 months (5 years)				x 60			
	,				7			
39d. <b>To</b>	otal. Multiply line 39c by 60		\$	-8,984.40	Copy here=>	\$	-8,984.40	
40. Find out	whether there is a presumption of abuse. Check the	box that ap	plies:					
■ The I	line 39d is less than \$7,700*. On the top of page 1 of the	nis form, che	eck box 1, The	ere is no presu	ımption of a	abuse. Go to I	Part 5.	
	line 39d is more than \$12,850*. On the top of page 1 of 4 if you claim special circumstances. Go to Part 5.	f this form, o	check box 2, 7	There is a pres	sumption of	<i>abu</i> se. You r	nay fill out	
	line 39d is at least \$7,700*, but not more than \$12,850	<b>0*.</b> Go to line	e 41.					
	to adjustment on 4/01/19, and every 3 years after that for			he date of adju	ustment.			
•				•				

**Charles C Ainsworth** 

Debtor 1	Cha	rles C Ainsworth	Case number (if known)
41.	41a.	Fill in the amount of your total nonpriority unsecured debt. If you filled A Summary of Your Assets and Liabilities and Certain Statistical Information Schedules (Official Form 106Sum), you may refer to line 3b on that form.	
		,,,,,,,,,,,,	x .25
	41b.	25% or your total nonpriority unsecured debt. 11 U.S.C. § 707(b)(2)(A)(i	
42 <b>D</b> c	tormi	Multiply line 41a by 0.25ne whether the income you have left over after subtracting all allowed d	
25	% of y	e box that applies:	eductions is enough to pay
		<b>39d is less than line 41b.</b> On the top of page 1 of this form, check box 1, <i>Th</i> part 5.	nere is no presumption of abuse.
		<b>39d is equal to or more than line 41b.</b> On the top of page 1 of this form, chamption of abuse. You may fill out Part 4 if you claim special circumstances.	
Part 4:	Giv	ve Details About Special Circumstances	
		we any special circumstances that justify additional expenses or adjustres alternative? 11 U.S.C. § 707(b)(2)(B).	nents of current monthly income for which there is no
■ N	lo. Go	o to Part 5.	
□ Y		I in the following information. All figures should reflect your average monthly on. You may include expenses you listed in line 25.	expense or income adjustment for each
	ne	ou must give a detailed explanation of the special circumstances that make the cessary and reasonable. You must also give your case trustee documentatio justments.	
	G	Sive a detailed explanation of the special circumstances	Average monthly expense or income adjustment
	_		\$
	_		\$
	_		\$
	_		\$
Part 5:		n Below	
	-	gning here, I declare under penalty of perjury that the information on this stat	ement and in any attachments is true and correct.
		/ Charles C Ainsworth narles C Ainsworth	
_	Się	gnature of Debtor 1	
Da		arch 20, 2019 M / DD / YYYY	

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee			
+	\$75	administrative fee			
	\$275	total fee			

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy\_form

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. B2030 (Form 2030) (12/15)

### United States Bankruptcy Court Southern District of Mississippi

		nern District of Mississip	hı		
In re	Charles C Ainsworth		Case No		
		Debtor(s)	Chapter	_7	
	DISCLOSURE OF COMPE	NSATION OF ATTO	RNEY FOR I	DEBTOR(S)	
C	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filible rendered on behalf of the debtor(s) in contemplation	ng of the petition in bankruptcy.	or agreed to be pa	id to me, for serv	
	For legal services, I have agreed to accept		\$	815.00	
	Prior to the filing of this statement I have received			815.00	
	Balance Due			0.00	
2. 7	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed comp	pensation with any other person	unless they are me	mbers and associ	ates of my law firm.
	☐ I have agreed to share the above-disclosed compensor copy of the agreement, together with a list of the na				of my law firm. A
5.	In return for the above-disclosed fee, I have agreed to r	ender legal service for all aspect	s of the bankruptcy	case, including:	
ŀ	<ul> <li>a. Analysis of the debtor's financial situation, and rend</li> <li>b. Preparation and filing of any petition, schedules, sta</li> <li>c. Representation of the debtor at the meeting of credit</li> </ul>	tement of affairs and plan which	may be required;	-	n bankruptcy;
C	d. [Other provisions as needed]  Negotiations with secured creditors to reaffirmation agreements and applications and applications of liens on how the second	ons as needed; preparation			
5. I	By agreement with the debtor(s), the above-disclosed for Representation of the debtors in any diany other adversary proceeding.			nces, relief fron	n stay actions or
		CERTIFICATION			
	I certify that the foregoing is a complete statement of an ankruptcy proceeding.	ny agreement or arrangement for	payment to me for	representation of	of the debtor(s) in
М	larch 20, 2019	/s/ Charles C. Jul	ian, Jr.		
$\overline{D}$	Pate	Charles C. Julian	•		
		Signature of Attorne Charles C. Julian			
		PO Box 109	, 01.		
		Brandon, MS 390			
		601-664-2400 Fa			
		<u>charliejulian@ya</u> Name of law firm	100.0011		